

**THE SALVATION ARMY
MEIGHEN HEALTH CENTRE
2. Emergency Procedures**

Subject: CODE BROWN	Policy: 2.06
Effective Date: March 3, 2003	Site: MM, MRR
Revised: July 7, 2022	Approved By: Julie Wong

APPLICATION:

Code Brown is intended to outline actions to be taken when there is a spill of a hazardous material that exceeds routine clean up by staff and presents a serious safety risk to residents, staff and visitors or could significantly disrupt service delivery.

1. UPON IDENTIFICATION OF THE SPILL

The person discovering the chemical spill shall:

- If safe to do so, stop the source of flow
- Secure the area by closing doors, putting out yellow wet floor signage
- Alert the facility by activating a CODE BROWN or communicate with another staff member/reception/RN in charge depending on the shift to page a CODE BROWN
- Refer to the Safety Data Sheet (SDS) posted where the material is in use. If there is not a SDS posted, refer to the Workplace Hazardous Materials information System (WHMIS) binder for the SDS information sheet(s).
 - o Service Corridor
 - o Administration
- Await Assistance

2. PLAN ACTIVATION: CODE BROWN

Upon being notified of the spill, the staff member/reception/RN Nurse Designate depending on the shift will page a CODE BROWN over the emergency paging system

**Code Brown “location”
Code Brown “location”
Code Brown “location”**

3. ENVIRONMENTAL SERVICES MANAGER/RN NURSE DESIGNATE

Attend to the location to assess the situation.

- Should the chemical spill be able to be **managed on site**, follow the SDS sheet(s) for spill clean-up and disposal procedures adhering to PPE/ventilation/containment requirements.
 - o Spill kits are located at the reception

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- o Notify the Executive Director or Manager on Call if after hours
- Should the chemical spill **exceed what can be managed or is draining into the sewer system**, call the Fire Department (911).
- While waiting for Fire Department:
 - Secure the area
 - Assess area ventilation requirements and request appropriate adjustments (i.e.: closing / shutting off air handlers)
 - As required, designate a runner to meet the Fire Department and guide them into the spill area
 - Have the SDS sheet(s) of the spilled products, available for the Fire Department

4. ALL STAFF WITHIN THE FACILITY

Remain in your current work area and remain ready to receive further directions

5. EMERGENCY DECLARED OVER

CODE BROWN is declared over when the spill has been managed or when it has been determined that it is safe to resume regular operations

The code is cleared by the Environmental Services Manager/RN Nurse Designate

- Announce 3 times over the paging system.

**Code Brown All Clear
Code Brown All Clear
Code Brown All Clear**

RN NURSE DESIGNATE

Will notify:

- The Manager on Call if after hours

EXECUTIVE DIRECTOR/DESIGNEE

Will ensure the following notifications take place:

- Divisional Secretary for Social Mission

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- Ministry of Long-Term Care as per requirements

6. RECOVERY PLAN

Recovery may take several hours to several days or longer depending on the severity of the spill

- Charge Nurses will conduct a head count and assessment of residents. DOC/RN Nurse Designate will triage
- Charge Nurses/ Supervisors/RN Nurse Designate will check with staff to ensure they are able to return to their assigned duties. Any staff unable to return to duty will be replaced as per the **Staffing Contingency Plan**
- Workers should speak with their supervisor regarding any specific concerns, needs, or considerations
- The Organization should consider how to address any operations that may not be immediately available due to damage to facilities and equipment
- Code Green Horizontal or Total Evacuation of residents may be required depending on the extent of the damage
- The Director of Risk Management & Insurance at THQ is to be contacted and advised of any damage or remediation needed

7. DEBRIEF AND DOCUMENTATION

- Immediately when safe to do so an initial debrief will be held. Ongoing debriefing will be needed dependent on duration and nature of the spill
- Incident report will be initiated by the Executive Director/Designee or by the RN Nurse Designate if the spill occurred after hours
- Forms and statements will be collected by the Executive Director/Designee on site

8. WITHIN 30 DAYS OF INCIDENT

Once all information has been collected but within 30 days of the incident, a review and evaluation of the event(s) is completed

- A copy of the report will be distributed and discussed at the Interdisciplinary Quality Improvement Committee

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- Action plans with all interventions that would improve on the organization's response will be developed and work initiated to address future disaster events
- A copy of the report & action plan will be discussed with the Joint Occupational Health & Safety Committee

10. ONGOING COMMUNICATION

As directed by Territorial Secretary for Public Relations

11. TESTING & EVALUATION OF CODE BROWN

- This emergency code will be tested annually unless initiated during the calendar year
- Debriefing Team Leader(s) will be assigned to the appropriate area with the steps within this policy or corresponding form to review employee performance and provide direction if required for quality improvement purposes
- Debriefing reports will be reviewed by the appropriate Department Head and other team members as appropriate for quality improvement purposes
- A copy of the debriefing reports will be submitted to the Interdisciplinary Quality Improvement Committee to coordinate revision of the Code Brown emergency plan as required